

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 31 1997 8:00am
Secretary of State

DOCUMENT # N94000000321 (9)

1. Corporation Name

SAINT HUGH OAKS VILLAGE ASSOCIATION, INC.

Principal Place of Business
**3500 PAN AMERICAN DR.
MIAMI FL 33133**

Mailing Address
**c/o Brenda J. Rivers
3627 S.W. 37th Ave
MIAMI FL 33133**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

01/24/1994

3a. Date of Last Report

08/29/1996

4. FEI Number

65-0576847

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,

Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

**CAROLLO, JOE
3500 PAN AMERICAN DR.
MIAMI FL 33133**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE
NAME **DAWKINS, MILLER P**
STREET ADDRESS **3500 PAN AMERICAN DR.**
CITY-ST-ZIP **MIAMI FL 33133**

TITLE **T** ☒ DELETE
NAME **SURANA, MANOHAR S**
STREET ADDRESS **3500 PAN AMERICAN DR.**
CITY-ST-ZIP **MIAMI FL 33133**

TITLE **SD** ☐ DELETE
NAME **GORT,**
STREET ADDRESS **3500 PAN AMERICAN DR.**
CITY-ST-ZIP **MIAMI FL 33133**

TITLE **D** ☐ DELETE
NAME **PLUMMER, JR., J.L.**
STREET ADDRESS **3500 PAN AMERICAN DR.**
CITY-ST-ZIP **MIAMI, FL 33133**

TITLE **D** ☒ DELETE
NAME **CAROLLO, JOE**
STREET ADDRESS **PAN AMERICAN DR.**
CITY-ST-ZIP **MIAMI FL 33133**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **D** ☐ Change ☒ Addition
12 NAME **RIVERS, BRENDA J.**
13 STREET ADDRESS **3627 S.W. 37th AVENUE**
14 CITY-ST-ZIP **MIAMI FL 33133**

21 TITLE **D** ☐ Change ☒ Addition
22 NAME **MAURER, MARTA**
23 STREET ADDRESS **3611 S.W. 37th AVENUE**
24 CITY-ST-ZIP **MIAMI FL 33133**

31 TITLE **S/T/D** ☒ Change ☐ Addition
32 NAME **GORT, WIFREDO**
33 STREET ADDRESS **3500 PAN AMERICAN DR.**
34 CITY-ST-ZIP **MIAMI FL 33133**

41 TITLE **P/D** ☒ Change ☐ Addition
42 NAME **PLUMMER, JR., J.L.**
43 STREET ADDRESS **3500 PAN AMERICAN DR.**
44 CITY-ST-ZIP **MIAMI FL 33133**

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☒ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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*****70.00**

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Brenda J. Rivers, Director*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/96)